

ISSUE STAMP STAMP AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		05-18-01
O.I.P.E. CLASSIFIER		49	6/9/01
FORMALITY REVIEW	AK	931	07/03/01
RESPONSE FORMALITY REVIEW	AK	1030	9-24-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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